

Employee Reference	Copy
Wage and Tax Statement	2019
OMB No. 1545-0008	
Copy 2 to be filed with employee's State Income Tax Return	

Only for government records
Control number **002448** Dept. **A** Corp. **Employer use only**

102448 BOST/MZG 100301 Employer's use only **537**

Employer's name, address, and ZIP code

HOTEL 57 SERVICES LLC
57 EAST 57TH ST
NY NY 10022

Batch #01784

If Employee's name, address, and ZIP code

OLIVE RODRIGUEZ

655 EAST 81 STREET
1ST FL

BROOKLYN, NY 11236

Employer's FED ID number **a** Employee's SSA number

16-1741079

Wages, tips, other comp. **57437.58**

Federal income tax withheld **5526.54**

Social security wages **66644.69**

Medicare wages and tips **66644.69**

Social security tips **4131.97**

Medicare wages and tips **966.35**

Social security tips **Allocated tips**

10 Dependent care benefits

1 Nonqualified plans **12a See instructions for box 12**

C 174.31

4 Other **12b D 9207.11**

28.80 SDI 106.93 NY PFL 12c DD 13124.54

12d X 13 Stat emp. Ret. plan 3rd party sick pay

15 State Employer's state ID no. **16 State wages, tips, etc.**

NY 16-1741079 57437.58

17 State income tax **18 Local wages, tips, etc.**

2702.96 57437.58

19 Local income tax **20 Locality name**

1837.74 NYC RES

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Federal Filing Copy

W-2 Wage and Tax Statement 2019

OMB No. 1545-0008

This blue section is your Earnings Summary which provides more detailed information on the generation of your W-2 statement and W-4 profile. The reverse side includes Instructions and other general information.

EXHIBIT

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1. Your Gross Pay was adjusted as follows to produce your W-2 Statement.

	Wages, Tips, other Compensation Box 1 of W-2	Social Security Wages Box 3 of W-2	Medicare Wages Box 5 of W-2	NY. State Wages, Tips, Etc. Box 16 of W-2	NYC RES Local Wages, Tips, Etc. Box 18 of W-2
Gross Pay	71,414.34	71,414.34	71,414.34	71,414.34	71,414.34
Plus GTL (C-Box 12)	174.31	174.31	174.31	174.31	174.31
Less 401(k) (D-Box 12)	9,207.11	N/A	N/A	9,207.11	9,207.11
Less Other Cafeteria	3,439.46	3,439.46	3,439.46	3,439.46	3,439.46
Less ER PD Transportation	1,504.50	1,504.50	1,504.50	1,504.50	1,504.50
Reported W-2 Wages	57,437.58	66,644.69	66,644.69	57,437.58	57,437.58

2. Employee Current W-4 Profile. To make changes, see a new W-4 with your payroll department.

OLIVE RODRIGUEZ
655 EAST 81 STREET
1ST FL
BROOKLYN, NY 11236

Social Security Number: 096-86-3031

Taxable Marital Status: SINGLE

Exemptions/Allowances:

FEDERAL: 3

STATE: 3

LOCAL: 3

b. 2019 ADP, LLC

1 Wages, tips, other comp. 57437.58	2 Federal income tax withheld 5526.54
3 Social security wages 66644.69	4 Social security tax withheld 4131.97
5 Medicare wages and tips 66644.69	6 Medicare tax withheld 966.35
d Control number 002448	Dept. BOST/MZG
Employer use only A	537

c. Employer's name, address, and ZIP code

HOTEL 57 SERVICES LLC
57 EAST 57TH ST
NY NY 10022

b Employer's FED ID number 16-1741079	a Employee's SSA number 174.31
7 Social security tips Allocated tips	10 Dependent care benefits
9	12a See instructions for box 12
11 Nonqualified plans C 174.31	12b D 9207.11
14 Other 28.80 SDI 106.93 NY PFL 12c DD 13124.54	12d X 13 Stat emp. Ret. plan 3rd party sick pay

e/ Employee's name, address and ZIP code

OLIVE RODRIGUEZ
655 EAST 81 STREET
1ST FL
BROOKLYN, NY 11236

15 State Employer's state ID no. NY 16-1741079	16 State wages, tips, etc. 57437.58
17 State income tax 2702.96	18 Local wages, tips, etc. 57437.58
19 Local income tax 1837.74	20 Locality name NYC RES
City or Local Staten Island	Filing Copy 2019

W-2	Wage and Tax Statement	2019	OMB No. 1545-0008
Copy 2 to be filed with employee's State Income Tax Return	Copy 2 to be filed with employee's City or Local Income Tax Return	Copy 2 to be filed with employee's State Income Tax Return	Copy 2 to be filed with employee's City or Local Income Tax Return

Instructions for Employee

Box 1. Enter this amount in the wages line of your tax return.
Box 2. Enter this amount in the federal income tax withheld line of your tax return.
Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 Instructions.
 Determining you are required to complete Form 8959
Box 6. This amount includes the 1.45% Medicare tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above \$200,000.
Box 8. This amount is not included in box 1, 3, 5, or 7. For information on how to report tips on your tax return see your Form 1040 Instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Income with your income tax return to report at least the indicated amount unless you can prove that you received a smaller amount if you have a record that shows the actual amount of tips you received or that the amount even if it is more or less than the allocated tips on Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form 4137. That amount is reported as income on other tips you did not report to your employer by filing Form 137 your unreported security tips will be credited to your social security record (use do figure out benefits).

Box 10. This amount includes the total dependent care benefit that your employer paid to you incurred in your behalf including amounts from a section 125 cafeteria plan. Any amount over \$5,000 is included in box 1. Complete Form 441, Child and Dependent Care Expenses, if you qualify for tax-free and nontaxable amounts.

Box 11. This amount (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation non-governmental plan; (b) includes in box 3 and/or 5 if it is a preexisting deferred under a nonqualified section 57(b) plan that can be variable or social security and Medicare taxes (b) years before the holder has substantial risk of forfeiture of your right to the deferred amount; (b) should not be used if you had a deferral and received a distribution the same calendar year if you made a deferral and received a distribution the same calendar year and you are not eligible to file end-of-the-year tax return by your employer should file Form SSA-13, Employee Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following text explains the code numbers shown in box 12. You may need this information to complete your tax return. Elective deferrals (code D, E, F, and S) and designated Roth contributions (codes V, BB, and EE) under all plans are generally limited to a total of \$19,000-\$13,000 if you only have SIMPLE plans; \$22,000

for section 403(b); and you qualify for the 15-year rule explained in Pub. 571. Deferrals under a 401(k) are limited to \$19,000. Deferrals under a 403(b) are limited to \$7,000.

However, if you are at least age 50 in 2019 you may employ may have followed an additional deferral up to \$5,000 (\$3,000 in section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall plan elective deferral for Code 403(b) the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. An amount in excess of the yearly allowed limit must be included in income. See the instructions for Form 1040.

Note: If a year follows code D through H, S, Y, AA, BB, or EE, you must make up previous contributions prior to the year(s) where you were in military service to figure whether the amount exceeds deferrals. Consider the concurrent for the year(s) shown prior to the current year if no years shown for contribution(s) for the current year.

A—Uncollected due to security RRTA on tips. Includes this tax on Form 1040. See the Form 1040 Instructions.

B—Uncollected Medicare on tips. Includes this tax on Form 1040. See the Form 1040 Instructions.

C—Taxable cost of group-term life insurance over \$50,000 (includes in box 1, 3 (up to social security wage base) and 5)

D—Elective deferrals to a section 401(k) cash deferral arrangement. Also includes deferrals under SIMPLE arrangements or plans part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement.

F—Elective deferrals under section 408(k)(6) salary reduction SEP.

G—Elective deferrals under employee contribution (including one elective deferrals) under section 457(b) deferred compensation plan.

H—Elective deferrals to a section 501(c)(18) DPA exempt organization. See the Form 1040 Instructions for how to deduct.

J—Nontaxable sick pay (information only not included in box 1, 3, or 5)

K—20% excise tax on excess gold or parachute payments. See the Form 1040 Instructions.

L—Substantial employer business expense reimbursements (nontaxable).

M—Uncollected due to security RRTA on taxable cost of group-term life insurance over \$50,000 for employees only. See the Form 1040 Instructions.

N—Uncollected Medicare on taxable cost of group-term life insurance over \$50,000 for employees only. See the Form 1040 Instructions.

P—Excludable moving expenses reimbursed to you as a member of the U.S. Armed Forces (not the National Guard) or S.

Q—Nontaxable sick pay. See the instructions for Form 1040 for details regarding this amount.

R—Employer contributions to a USA Retirement Plan (Form R852, ArchMSA and Long-Term Care Contracts).

S—Employer-military reduction contribution under section 408(p) SIMPLE plan (not included in box 1)

T—Adoption (if not included in box 1) Complete Form 39 Qualifying Exemption for jointly owned individual accounts.

V—Incomerelaxation of contribution limits for Code 403(b) includes box 1, 3 (up to social security wage base) and 5. See Pub. 525, Taxable and Non-taxable Income for Reporting Requirements.

W—Employer contributions including non-elective deferrals contributed under section 401(k) (not including plan having account Report on Form 889 Health Savings Account (HSAs)).

Y—Deferrals under section 109(a) nonqualified defined compensation plan.

Z—Income under nonqualified deferred compensation plan which satisfy section 409A. This amount is not included in box 1. It is subject to an additional 20% plus interest. See the Form 1040 Instructions.

AA—Designated Roth contribution under section 401(k) plan.

BB—Designated Roth contribution under section 403(b) plan.

DD—Cost of employer-sponsored health coverage (the amount reported with code D is not taxiable).

EE—Designated Roth contribution under a government section 457(b) plan. This amount does not apply to contributions under tax-exempt organizations section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement.

GG—Incomerelaxation of grants under section 83(b).

HH—Aggregate deferrals under section 83(b) elections of the code for the preceding year.

Box 13. If the "Retirement plan" box is checked, specify items up to the amount of traditional R/ contribution you may deduct. See Pub. 590-A Contributions Individuals Retirement Arrangements (PAs).

Box 14. Employee may use this box to report information such as stated disability insurance with the union dues and long-term care assistance payment for a member of the family. Also an employee who is fully enrolled in a plan that is entitled to report a deduction in RRTA on his/her tax return. Tier 1 Tax Medicare Tax (Additional Medicare Tax) including property by the employer. The employee in railroad retirement RRTA compensation.

Note: Keep Copy C of Form W-2 for at least 3 years after the date you file your income tax return. However, help protect your social security benefits, keep Copy C until you receive a notice involving social security benefits just in case there is a question about your work record or concerning a particular year.

Department of the Treasury Internal Revenue Service

NOTE THESE ARE SUBSTITUTE WAGE AND TAX STATEMENT AND RECAPTURE FORMS FOR FILING WITH YOUR FEDERAL STATE AND LOCAL CITICOM TAX RETURNS.

This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.

IMPORTANT NOTE:

In order to insure efficient processing, attach this W-2 to your tax return like this (following agency instructions):

TAX RETURN

THIS FORM OTHER
W-2'S

Notice to Employee

Do you want to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you don't have to file a tax return you may be eligible to claim a refund if box 2 shows a negative amount if you are eligible for any credit.

Claimed or credits (EIC) You may be able to take the EIC for 2019 if your adjusted gross income (AGI) is less than a certain amount (the amount of the credits based on income and family size). Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if you invest more in income than the specified amount for 2019 or if income earned for services provided while you were in a mental or penal institution for 2019. For limits and more information, visit www.irs.gov/EIC. See Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded by you but only if you file a tax return.

Clergy and religious workers If you are subject to social security and Medicare taxes see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections If your name SSN or address is incorrect, correct copies A, C, and D and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c Corrected Wage and Tax Statement with the Social Security Administration (SSA).

If corrected name SSN or incorrect address is reported to the SSA on Form W-2, be sure to file your copies of Form W-2 from your employer for all corrections made so you may file them with your tax return. You may also file them with the SSA if you are showing on your social security card that you have a different name. Ask for a new card that displays your corrected name. The SSA office or by calling 800-772-1210. You can also visit the SSA website at www.SSA.gov.

Cost of employer-sponsored health coverage If such costs are provided by the employer, file the reporting box 12, using code DD, of the cost of employer-sponsored health coverage for your information only. The amount reported with code D is not taxiable.

Credit for excess taxes If you had more than one employer in 2019 and more than \$8,239.80 social security and/or tier 1 railroad retirement RRTA taxes were withheld, you may be able to claim a credit for the excess against your federal tax. If you had more than one employer and more than \$4,836.30 Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimate Tax.